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07/25/2008 13:32 FAX

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NAME		Abuelito	Cheese	USER	CHARG	E SELF MO	NITORING REP	ORT Re	The t
ADDRE			Main stree	t Paterson	n N.J.		· · · · · · · · · · · · · · · · · · ·	The state of the s	And the second s
FACILI	TY LOCAT					et Paterson N.J.			
NEW CU	USTOMER	ID / OU	TLET ID	:272200	56-1	OLD	OUTLET DESIGN	ATION:	
		NITORI	NG PERI				VOLUN	ME DISCHARGED	THIS PERIOD
	START			END	1			157,454	GALLONS
06	01	08	06	30	08	// /	4	CU. FT. $x 7.48 = G$	ALLONS
МО	DAY	YR	МО	DAY	YR	15t	EFFLUE THIS PERIO	NT METER REAL D	DING LAST DAY
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6/12/		000	- 4	42 × 5 × 6 × 6 × 6 × 6 × 6 × 6 × 6 × 6 × 6	32		Abued.	To Cheen	JUL 2008 Zim Input Industrial Dept
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with a syste of the perso ubmitted i ubmitting	der penalty em designed on or persor s, to the bes false inform	l st nation, in	ciuding the	possiom		en So		edrak	igN !!
	AUTHOR			IK .	T	YPE NAME A	ND TITLE	TELEPHON	L IN UTVILLER
·		-			Carol Paiz	General Mar	ager	973-34:	5-3503
				1					1

PVSC FORM MR-2 REV .3 6/93

7/14/2008

USER CHARGE SELF MONITORING REPORT

NAME

Abuelito Cheese

JUL 17 2008

ADDRESS

607-609 Main street Paterson N.J.

FACILITY LOCATION

607-609 Main street Paterson N.J.

NEW CUSTOMER ID / OUTLET ID: 27220056-1

α	OTITI	PT	DESIGNATION	
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MONITORING PERIOD						
	START			END		
06	01	08	06	30	08	
МО	DAY	YR	МО	DAY	YR	

	VOLUME DISCHARGED THIS PERIOD				
	157,454 GALLONS				
Γ	CU. FT. x 7.48 = GALLONS				
	EFFLUENT METER READING LAST DAY				
- 1	THIS PERIOD				

DATE	BOD	TSS
6/13/2008	4130.0	
5/23/2008		1,630

DATE	BOD	TSS
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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT	TYPE NAME AND TITLE	TELEPHONE NUMBER
Carol Ran	Carol Paiz General Manager	973-345-3503
		7/14/2008

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